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FEC MAIL CENTER

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines

12FE4M5

Funding Developing Leadership Political Action Committee aka FDL PAC

ADDRESS (number and street)

701 8th Street, NW

(Check if address
is changed)

Suite 500

Washington

DC

20001

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address
is changed)

mgkelley@wms-jen.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

2. DATE M M / D D / Y Y Y Y
09 / 22 / 2010

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer Stuart Sander

Signature of Treasurer

Stuart Sander

Date

M M / D D / Y Y Y Y
09 / 22 / 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

10030432418





Candidate Committee:

- Name of Candidate _____

Name of Candidate _____

(d) This committee is a (National, State (Democratic, Republican, etc.) Party.

X In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

1.  FEC ID number **C**
2.  FEC ID number **C**
3.  FEC ID number **C**
4.  FEC ID number **C**

0103050425

Write or Type Committee Name

Funding Developing Leadership Political Action Committee aka FDL PAC**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor****Frank D. Lucas**

Mailing Address

2311 Rayburn HOB**Washington****DC****20515**

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

☒ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name

Meredith Kelley

Mailing Address

701 8th Street, NW**Suite 500****Washington****DC****20001**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number **202** - **659** - **8201****8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name

of Treasurer

Stuart Sander

Mailing Address

P.O. Box 391**Cheyenne****OK****73628**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number - -

10030432420

Full Name of
Designated
Agent

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Chain Bridge Bank

Mailing Address

1445-A Laughlin Avenue

McLean

VA

22101

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

10030432421

Federal Election Commission
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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	10/6/10
PREPARER	DATE PREPARED